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## BIB DATA SHEET

CONFIRMATION NO. 2587

| SERIAL NUMBER  | FILING or 371(c)<br>DATE  | CLASS                                  | GROUP ART UNIT  | ATTORNEY DOCKET<br>NO.    |
|--|---|--|---|---------------------------|
| 10/573,014   | 08/09/2006  | 424                                    | 1619  | 60838.000600              |
| <b>RULE</b>  |   |  |   |                           |
| <b>APPLICANTS</b><br>Abraham Martinus Cohen Stuart, Wageningen, NETHERLANDS;<br>Stefan Van Der Burgh, Wageningen, NETHERLANDS;<br>Reint Gerrit Fokkink, Hengelo, NETHERLANDS;<br>Arie De Kreizer, Wageningen, NETHERLANDS;   |   |  |   |                           |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP04/10773 09/24/2004  |   |  |   |                           |
| <b>** FOREIGN APPLICATIONS *****</b><br>EUROPEAN PATENT OFFICE (EPO) 03078031.6 09/25/2003   |   |  |   |                           |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>08/31/2006   |   |  |   |                           |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/TIGABU KASSA/</u><br><small>Examiner's Signature</small> | <input type="checkbox"/> Met after Allowance<br><small>Initials</small>   | <b>STATE OR COUNTRY</b><br>NETHERLANDS | <b>SHEETS DRAWINGS</b><br>4   | <b>TOTAL CLAIMS</b><br>25 |
| <b>INDEPENDENT CLAIMS</b><br>3   |   |  |   |                           |
| <b>ADDRESS</b><br>HUNTON & WILLIAMS LLP<br>INTELLECTUAL PROPERTY DEPARTMENT<br>1900 K STREET, N.W.<br>SUITE 1200<br>WASHINGTON, DC 20006-1109<br>UNITED STATES   |   |  |   |                           |
| <b>TITLE</b><br>Complex coacervate core micelles as surface modification or surface treatment  |   |  |   |                           |
| <b>FILING FEE RECEIVED</b><br>1500   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                           |